



June 8, 2005 2005 JUN 10 PM 2: 54

The Honorable Robert E. Nicolay
Chairman
Certificate of Need Task Force
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, MD 21215

Dear Chairman Nicolay:

Hospice of Charles County, which provides care and comfort to individuals diagnosed with a life limiting condition in Charles County, appreciates the opportunity to present its views on the Certificate of Need (CON) process for hospice care to the Health Care Commission's Certificate of Need Task Force.

We applaud the Commission's interest in taking a fresh look at the CON issue and for allowing us to inject input into the debate. For several years now, our Board of Directors, select hospice committees, professional staff and other interested parties, to include our state senators and delegates and county commissioners have held meaningful discussions regarding the CON issue. After serious deliberation I submit to you that the CON is of paramount concern to us and we believe it continues to have relevance. We therefore, **respectfully go on record strongly urging the Commission to maintain the existing CON process for Hospice care.**

We believe the present CON system is a sound approach with adequate controls and we would argue that any attempts to tweak the process may weaken it and produce serious adverse consequences. The existing regulations have been time tested and have given us the legitimacy to provide quality patient care to anyone who qualifies for and seeks admission to hospice care within our geographic coverage area. Furthermore, the benefits to patients and the families are remarkable and are provided at little or no cost to the patient and their family. We do not see how increased competition could improve upon this.

Hospice of Charles County is a well established, respected community-based resource whose non-profit business model was created in 1983. Over the past 22 years, we have positioned ourselves to meet the challenges and changing needs of the growing and increasingly diverse population we serve. We pride ourselves in being able to provide personalized, high quality service to hospice patients and their families, and we have earned the support of a grateful community. We work very hard to be relevant, accessible and accountable, and are conscientious in the discharge of our duties and responsibilities. We have every intention to continue our proud legacy as long as the need exists, and the continuance of the CON will help ensure stability and continuity.

Our deep interest in preserving the existing CON is not without merit. We believe open competition would undeniably cause confusion among patients, family caregivers, the medical community and the general public. It may create unnecessary delays from doctors, discharge planners and others over which hospice care provider to send a referral, and impose a perceived need from patients and caregivers to shop around for the best service. Confusion, along with delayed decisions – which are further amplified by the strong desire by a patient to continue curative treatment – would exacerbate the late referrals we are already experiencing. As a point of interest, approximately 25 percent of our current admissions die within seven days. We also fear that unscrupulous hospice care providers may attempt to pick and choose which patients to admit based on diagnosis and severity of condition, type of insurance coverage, distance and profitability, as well as compete for donations and volunteers.

Changing the existing CON may force every hospice to redirect already scarce patient care dollars to marketing expenditures and for increased salaries to retain or hire skilled nursing professionals – who are already in short supply. We rely on the generosity of the public to help cover the expenses for individuals who are without means and do not qualify for Medicare, Medicaid, VA or have private insurance; therefore, the competition may cause cut-backs in the programs and services that dying patients and their survivors need and have come to depend on. Who would take on the social responsibility to be the “safety net” in providing services to these individuals?

As a non-profit, we struggle each year to be fiscally responsible and operate on a balanced budget. Increased competition may force us to radically change our business model and focus. Today, we believe we have the right balance, yet we fear that a change in the CON may further erode the already limited cadre of volunteers who provide valuable support and force us to ration or eliminate this service or hire and pay additional staff.

A terminal diagnosis has the power to make a person especially vulnerable, and in the past individuals have found comfort knowing that Hospice of Charles County was ready, willing and able to give them the medical, emotional and spiritual support they wanted and needed. They placed their trust in us and in return, we gave them our best. We take our responsibilities seriously. We meet the needs and play a vital role in our community. We implore you to help us maintain the goodwill and confidence the general public has for Hospice of Charles County.

On behalf of Hospice of Charles County and the families we serve, I thank you again for your interest and solicit your support in maintaining the CON for Hospice care.

Sincerely,



Gregory V. Floberg
Director of Community Outreach and Development